

Patricia Booker

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)							SERIAL NO. 10/573197		FILING DATE					
CLAIMS							APPLICANT(S)							
	AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT			AS FILED		AFTER 1 <sup>st</sup> AMENDMENT		AFTER 2 <sup>nd</sup> AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	
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2							52							
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47							97							
48							98							
49							99							
50							100							
TOTAL IND.							TOTAL IND.		TOTAL IND.		TOTAL IND.		TOTAL IND.	
TOTAL DEP.							TOTAL DEP.		TOTAL DEP.		TOTAL DEP.		TOTAL DEP.	
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